

CHAMPIONS YOUTHFUL PARENTING PROGRAM

Local Evaluation Plan

Project Description

The Champions Youthful Parenting Program (CYPP) is using the adapted version of the Nurturing Parenting Program (NPP) for youthful parents (up to 24 years of age). NPP builds parenting skills that are necessary to reduce the risk of abusive and antisocial parenting, and social service and criminal justice involvement. It is designed to increase prosocial support systems and behaviors. In addition, NPP addresses abuse and neglect, intergenerational cycles of antisocial and maladaptive coping and decision-making, substance use, and familial discord and violence, and it builds on the strengths of the participants. CYPP plans to serve 110 participants and their families each year to meet three goals: to reduce rates of child abuse and neglect, to increase the number of youthful parents who have health insurance and utilize benefits for themselves and their children, and to reduce the number of youthful parents who are involved in the justice system.

CYPP recruits youthful parents and those youth identified as demonstrating risk factors for teen pregnancy, youthful parents, and young families. CYPP is a voluntary program. Youth are recruited from partner agencies, schools, and the community-at-large. Staff completes a basic intake on all referred (including self-referred) parents and youth at risk of becoming young parents to determine services needed. The assessment focuses on criminogenic needs, as well as needs related to housing, education, employment, job skills training, health care, food insecurity, etc. Services are family-centered, trauma-informed, culturally sensitive and appropriate, and delivered in locations and at times reasonable for access. Case plans are individualized and strength-based.

All participants complete a pre and post Adult Adolescent Parenting Inventory-2 (AAPI-2), which is an inventory that is designed to assess the parenting and child rearing attitudes of parents. The parenting and child rearing sub-scales include: 1) expectations of children, 2) parental empathy towards children's needs, 3) use of corporal punishment, 4) parent-child roles, and 5) children's power and independence. The AAPI-2 has been in use for over 30 years and is developed for consistency and reliability. The inventory is key in the development of the case plan for each client.

The case management model used by CYPP staff is assertive-community treatment based, assessing life and criminogenic domains. It focuses on building a case plan around needs identified in these domains, in conjunction with the AAPI-2 and any additional collateral risk assessment and information. Linkages to additional Champions services will be made available to all CYPP participants, such as residential treatment, outpatient services, gang diversion, etc.

As the program develops, CYPP staff will deliver the NPP adapted version for youthful parents in a group-based format, with the children meeting in a separate, age-appropriate group setting. The duration of the program will be dependent on the referral source, collateral information, assessments, and the needs responsiveness information. The programs can range from 16 sessions to 26 (secondary model and tertiary model). This adapted model of programming is designed for youthful parents (teens and transition-age youth). Each session is 90 minutes in duration and is inclusive of skills area content, application of skills, processing, and creative expression. Staff also conducts home visits with participant families. Home visits include observations of parenting, coaching, assessment, and monitoring.

CYPP staff tracks risk assessment data, treatment planning, and coordination of services (including referrals and linkages to outside services) within Kareo (Cerner Electronic Health Record). Kareo allows the generation of periodic reports to ensure that expected progress is being made at the individual, group, and program-wide levels. Additional data tracked and monitored will include: criminogenic areas, abstinence from substance use, housing status, human services involvement, employment status, criminal justice involvement, access to services, retention in services, and social connectedness. All data will be collected face-to-face at three main collection points: intake, 6-month post intake, and discharge with a target follow-up rate of 80%.

Youth must successfully complete 16 weeks of curriculum/home visits, as well as show improvement in one or more of their client-centered goals as outlined in their case management plan. Improvement is measured through changes in clients' risk assessment and AAPI scores. Both instruments are administered at intake, 6-months post intake, and at discharge. In addition, clients will not have any new episodes with the justice system and will not have new pregnancies

Evaluation Plan

GOAL 1: Reduce the rate of child abuse and neglect in Kings County.

Objective 1: Provide participants with skills, knowledge, resources, and support through pregnancy and child rearing via psychoeducation, case management, and home visitation.

Related Activities:

- (a) Intake and AAPI-2 assessment for each incoming client
- (b) Provide 16 to 26 weeks of NPP, as appropriate
- (c) Establish a case management plan and track client progress
- (d) Conduct weekly home visits during enrollment in program

Outcome Measure 1:

Reduce the rate of child abuse and neglect in the target population in Kings County by 15%, from 74.2/1000 to 63.1/1000.

- **Data Source(s):** California Child Welfare Indicators Project Reports, UC Berkeley Center for Social Services Research
- **Who Will Collect the Data:** CYPP program staff
- **Timing of Data Collection:** Annually
- **Population or Sample:** Census
- **How Will the Data be Described/Analyzed:** Data will be collected from KidsData.org and/or the California Child Welfare Indicators Project Reports (UC Berkeley) by CYPP staff an annual basis and compared to baseline. Outcomes will be reported in the final evaluation report.

Process Measures:

- 1.1** The two case workers and the parenting program manager will provide the Nurturing Parenting Program to 110 participants and their families each year.
- **Source of Information/Instrument(s):** Anasazi
 - **Who Will Collect the Data:** CYPP program staff
 - **Timing of Data Collection:** Ongoing
 - **Population or Sample:** All participating youthful parents.
 - **How Will the Data be Described/Analyzed:** Number of clients served will be reported annually and included in the final evaluation report.
- 1.2** Program staff will identify at least 10 new participants each month.
- **Source of Information/Instrument(s):** Anasazi
 - **Who Will Collect the Data:** CYPP program staff
 - **Timing of Data Collection:** Ongoing
 - **Population or Sample:** Incoming clients
 - **How Will the Data be Described/Analyzed:** The number participants added each month will be tracked and reported annually.
- 1.3** 50% of participants will complete the program.
- **Source of Information/Instrument(s):** Program attendance and case plan notes
 - **Who Will Collect the Data:** CYPP program staff
 - **Timing of Data Collection:** Ongoing
 - **Population or Sample:** All participating youth.
 - **How Will the Data be Described/Analyzed:** The percentage of youth who successfully complete their case plan will be included in the annual report.

Goal 2: Increase health care enrollment and benefit utilization for clients and their child(ren).

Objective 2:	Provide linkage services for all medical and benefit resources, inclusive of case management for applications, setting and adhering to treatment regimens and appointments, and securing adequate transportation for such.
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Related Activities:

- (a) Complete intake interview to determine current health coverage.
- (b) Refer clients to appropriate agencies for enrollment in health coverage, as needed.
- (b) Educate clients about the importance of routine physical health exams.
- (c) Work with clients to make healthy choices (e.g., nutrition, exercise, tobacco-free homes).
- (e) Assist in identifying transportation options for clients to get to medical appointments. (Case Managers will provide transportation if needed.)

Outcome Measure 2:

Increase the enrollment of participants in health coverage and proper utilization of benefits for self and child(ren) by 30%.

- **Data Source(s):** Intake form
- **Who Will Collect the Data:** CYPP program staff
- **Timing of Data Collection:** Ongoing
- **Population or Sample:** All incoming clients
- **How Will the Data be Described/Analyzed:** Data will be analyzed to determine the percentage of clients without health coverage who successfully enroll in a health care plan; descriptive analysis will be conducted regarding the utilization of services based on case notes and client interviews.

Process Measure:

- 2.1** At program exit, 80% of participants will demonstrate utilization of health services.
- **Source of Information/Instrument(s):** Self-report based on exit interview checklist
 - **Who Will Collect the Data:** CYPP program staff
 - **Timing of Data Collection:** Ongoing
 - **Population or Sample:** All program participants
 - **How Will the Data be Described/Analyzed:** Data from exit interview checklist will be analyzed by the evaluation team and reported annually.

Goal 3: Reducing justice involvement for the identified population by 20%.

Objective 3: Address dynamic criminogenic factors such as negative antisocial peer associations, substance use, mental health, antisocial cognitions and behaviors and improve education and employment skills via the application of the CYPP and any other needed programs and services.

Activities Related to Objectives 3:

- (a) Intake and assessment of criminogenic factors
- (b) Referral to appropriate programs and services
- (c) Tracking of client participation in alternative Champions programs
- (d) Tracking of client enrollment in programs and services offered through agency referral

Outcome Measure 3:

Reduce justice involvement for the identified population by 20%.

- **Data Source(s):** Intake assessment and exit interview
- **Who Will Collect the Data:** CYPP program staff
- **Timing of Data Collection:** Ongoing
- **Population or Sample:** All participants assessing positive for criminogenic factors and/or demonstrating need for education and/or employment skills
- **How Will the Data be Described/Analyzed:** Data from intake assessments and exit interviews will be submitted to the project evaluator for analysis. Outcomes will be reported periodically to project staff and included in the final evaluation report.

Process Measures

- 3.1** 80% of youth referred to alternative programs at Champions will accept services.
- **Source of Information/Instrument(s):** Kareo; exit interviews
 - **Who Will Collect the Data:** CYPP program staff
 - **Timing of Data Collection:** Ongoing
 - **Population or Sample:** All program participants
 - **How Will the Data be Described/Analyzed:** Data will be submitted to the program evaluator and included in the final evaluation report.
- 3.2** 60% of youth referred to outside programs will accept alternative services.
- **Source of Information/Instrument(s):** Kareo; exit interviews
 - **Who Will Collect the Data:** CYPP program staff
 - **Timing of Data Collection:** Ongoing
 - **Population or Sample:** All program participants
 - **How Will the Data be Described/Analyzed:** Data will be submitted to the program evaluator and included in the final evaluation report.

Project Oversight

The Champions Parenting Program Manager is creating a formal Advisory Committee that will oversee CYPP, and will include identified partners and peer advocates. The committee will begin meeting on a monthly basis in January 2019. It will review performance measures, monitor activities, and create a sustainability plan that includes strategies for future funding. The committee will seek contracts, present study session data and information for all local municipalities, and act as advocates for continuance of CYPP via costs savings to the partnering agencies and systems.

CYPP LOGIC MODEL			
GOAL 1. Reduce the rate of child abuse and neglect in Kings County			
Need-based Objective	Activities	Process Measure	Outcome Measure
Provide participants with skills, knowledge, resources, and support through pregnancy and child rearing via psycho-education, case management, and home visitation	<ul style="list-style-type: none"> • Intake and AAPI-2 assessment for each incoming client • Provide 16 to 26 weeks of NPP, as appropriate • Establish a case management plan and track client progress • Conduct weekly home visits during enrollment in program. 	<ul style="list-style-type: none"> • Provide NPP to 110 participants annually. • Identify at least 10 new participants each month • 50% of participants will complete the program 	Reduce the rate of child abuse and neglect in the target population in Kings County by 15%, from 74.2/1000 to 63.1/1000
GOAL 2. Increase health care enrollment and benefit utilization for clients and their child(ren)			
Needs-based Objective	Activities	Process Measure	Outcome Measure
Provide linkage services for all medical benefit resources, inclusive of case management for applications, setting and adhering to treatment regimens and appointments, and securing adequate transportation for such.	<ul style="list-style-type: none"> • Complete intake interview to determine current health coverage • Refer clients to appropriate agencies for enrollment in health coverage • Educate clients about the importance of routine physical exams • Work with clients to make healthy choices (nutrition, exercise, tobacco-free homes, etc.) • Assist in identifying transportation options for clients to get to medical appointments. (Case Managers will provide transportation if needed.) 	<ul style="list-style-type: none"> • At program exit, 80% of participants will demonstrate utilization of health services 	Increase enrollment of participants in health coverage and proper utilization of benefits for self and child(ren) by 30%
GOAL 3. Reduce justice involvement for the identified population by 20%			
Needs-based Objective	Activities	Process Measure	Outcome Measure
Address dynamic criminogenic factors such as negative antisocial peer associations, substance use, mental health, antisocial cognitions and behaviors, and improve education and employment skills via the application of NPP and other programs and services.	<ul style="list-style-type: none"> • Intake and assessment of criminogenic factors • Referral to appropriate programs and services • Tracking of client participation in alternative Champions programs • Tracking of client enrollment in programs and services offered through agency referral 	<ul style="list-style-type: none"> • 80% of youth referred to alternative programs at Champions will accept services • 60% of youth referred to outside programs will accept alternative services 	Reduce justice involvement for the identified population by 20%